

United States District Court
Western District of Tennessee

CREDIT CARD AUTHORIZATION FORM

We/I hereby authorize the United States District Court for the Western District of Tennessee to charge the following bank card number(s) for payment of filing fees and other related expenses.

Bar No. _____

User's Name _____

Name as it appears on credit card: _____

Name of Law Firm: _____

Business Mailing Address: _____

Email Address: _____

Business Phone No. (____) _____ Fax No. (____) _____

Master Card No. _____ Exp. Date _____

Visa Card No. _____ Exp. Date _____

Discover Card No. _____ Exp. Date _____

American Express: _____ Exp. Date _____

AE 4- Digit Security Code _____

Diner's Club: _____ Exp. Date _____

Please indicate if this credit card information is: NEW [] UPDATED []

This form will be kept on file in the Clerk's office, and shall remain in effect until specifically revoked in writing. It is the responsibility of the individual/firm/company named herein to notify the Clerk's office of the new expiration date when a credit card has been renewed, or if a card has been canceled or revoked.

Signature: _____ Date: _____

In the event the charge against this account is denied, you will receive a deficiency notice by email. Account denial may also result in untimely filing of your document(s). Any abuse of this privilege may result in your removal from the credit card program.

Please return form to:

USDC – Clerk's Office
ATTN: Intake Section
167 N. Main – Room 242
Memphis, TN 38103

FAX (901) 495-1206
or ATTN: Intake Section